

09 APR 15 PM 4:19

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Bob Casey for Senate Inc

ADDRESS (number and street) 607 14th Street, N.W.

Suite 800

☐ Check if different than previously reported. (ACC)

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00431056

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

PA 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☒ April 15 Quarterly Report (Q1)
☐ July 15 Quarterly Report (Q2)
☐ October 15 Quarterly Report (Q3)
☐ January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on in the State of

(c) 30-Day POST-Election Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on in the State of

5. Covering Period 01 01 2009 through 03 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas Leonard

Signature of Treasurer Electronically Filed by Thomas Leonard

Date 04 15 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

FE5AN018

20020154549

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Bob Casey for Senate Inc

Report Covering the Period:

From:

MM
01DD
01YYYY
2009

To:

MM
03DD
31YYYY
2009

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	94598.75	767558.71
(b) Total Contribution Refunds (from Line 20(d)).....	2500.00	4657.89
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	92098.75	762900.82
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	122114.23	604601.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	69877.90
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	122114.23	534723.91
8. Cash on Hand at Close of Reporting Period (from Line 27).....	213208.74	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Bob Casey for Senate Inc

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	9

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	61977.00	484976.23
(i) Itemized (use Schedule A).....	4874.00	15708.23
(ii) Unitemized.....	66851.00	500684.46
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	27747.75	266874.25
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	94598.75	767558.71
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	35498.85
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	94598.75	993810.85

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	122114.23	604601.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	40000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	2500.00	4306.39
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	351.50
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2500.00	4657.89
21. OTHER DISBURSEMENTS.....	6961.40	131654.91
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	131575.63	780914.61

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	250185.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	94598.75
25. SUBTOTAL (add Line 23 and Line 24).....	344784.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	131575.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	213208.74

FEC FORM 3Z (File with Form 3)

CONSOLIDATION REPORT OF RECEIPTS AND DISBURSEMENTS

(To Be Used By A Principal Campaign Committee)

Name of Principal Campaign Committee (In Full) Bob Casey for Senate, Inc.		Report Covering Period: From: 1 / 01 / 2009 To: 3 / 31 / 2009			
Committee Name		(a) Line No. 11(a) Total Contributions From Indiv./Persons Other Than Political Committees	(b) Line No. 11(b) Total Contributions From Political Party Committees		
A Bob Casey for Pennsylvania Committee		0.00	0.00		
B Column Total Last Page Only		66,851.00	0.00		
(c) Line No. 11(c) Total Contributions From Other Political Committees	(d) Line No. 11(d) Total Contributions From The Candidate	(e) Line No. 11(e) Total Contributions	(f) Line No. 12 Total Transfers From Other Authorized Committees	(g) Line No. 13(a) Total Loans Made or Guaranteed by the Candidate	(h) Line No. 13(b) Total All Other Loans
A 0.00	0.00	0.00	0.00	0.00	0.00
B 27,747.75	0.00	94,598.75	0.00	0.00	0.00
(i) Line No. 13(c) Total Loans	(j) Line No. 14 Total Offsets to Operating Expenditures	(k) Line No. 15 Total Other Receipts	(l) Line No. 16 Total Receipts	(m) Line No. 17 Total Operating Expenditures	(n) Line No. 18 Total Transfers to Other Authorized Committees
A 0.00	0.00	0.00	0.00	0.00	0.00
B 0.00	0.00	0.00	94,598.75	122,114.23	0.00
(o) Line No. 19(a) Total Loan Repayments of Loans Made or Guaranteed by The Candidate	(p) Line No. 19(b) Total Loan Repayments of All Other Loans	(q) Line No. 19(c) Total Loan Repayments	(r) Line No. 20(a) Total Contribution Refunds to Individuals/Persons	(s) Line No. 20(b) Total Contributions Refunds to Political Party Committees	(t) Line No. 20(c) Total Contribution Refunds to Other Political Committees
A 0.00	0.00	0.00	0.00	0.00	0.00
B 0.00	0.00	0.00	2,500.00	0.00	0.00
(u) Line No. 20(d) Total Contribution Refunds	(v) Line No. 21 Total Other Disbursements	(w) Line No. 22 Total Disbursements	(x) Line No. 23 Cash on Hand Beginning of Reporting Period	(y) Line No. 27 Cash on Hand Close of Reporting Period	(z) Line No. 9 Debts & Obligations Owed TO the Committee
A 0.00	0.00	0.00	13,210.52	13,210.52	0.00
B 2,500.00	6,961.40	131,575.63	263,396.14	226,419.26	0.00
(aa) Line No. 10 Debts & Obligations Owed BY the Committee	(bb) Line No. 6(c) Net Contributions	(cc) Line No. 7(c) Net Operating Expenditures			
A 0.00	0.00	0.00			
B 0.00	92,098.75	122,114.23			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 79
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Samuel A. Keesal, Jr.</p> <p>Mailing Address 400 Oceangate 14th Floor</p> <p>City State Zip Code Long Beach CA 90802</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Keesal Young & Logan Attorney</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1250.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 17 / 2009</p> <p>Transaction ID: C1927100</p> <p>Amount of Each Receipt this Period 1250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Salim Adaya</p> <p>Mailing Address 515 South Figueroa Street</p> <p>City State Zip Code Los Angeles CA 90071</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Self Employed Investor</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: C1927120</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Albert R. Boscov</p> <p>Mailing Address 70 Devon Drive</p> <p>City State Zip Code Reading PA 19606-9557</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Boscov's Department Stores Chairman</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 13 / 2009</p> <p>Transaction ID: C1910080</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 3250.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Abbe F. Flatman</p> <p>Mailing Address 1628 JFK Blvd. 15th Floor</p> <p>City Philadelphia State PA Zip Code 19103</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Flaster Greenberg Occupation Attorney</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 04 / 2009</p> <p>Transaction ID: C1901120</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Arthur M. Kaplan</p> <p>Mailing Address 1347 Rose Glen Road</p> <p>City Gladwyne State PA Zip Code 19035</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Fine, Kaplan and Black, R.P.C. Occupation Attorney</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 04 / 2009</p> <p>Transaction ID: C1901310</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Friends Of Dan Anders</p> <p>Mailing Address P.O. Box 1105</p> <p>City Philadelphia State PA Zip Code 19105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 04 / 2009</p> <p>Transaction ID: C1901340</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>Comprised of Permissible Funds</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>2000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 7 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Henry J. Sallusti Mailing Address 946 Columbia Street City State Zip Code Scranton PA 18509-1714 FEC ID number of contributing federal political committee. C Name of Employer RBC Occupation Investment Banker Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3300.00		Date of Receipt MM / DD / YYYY 01 / 29 / 2009 Transaction ID: C1869150 Amount of Each Receipt this Period 1400.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) David F. Simon Mailing Address 1317 Township Line Road City State Zip Code Gwynedd Valley PA 19437 FEC ID number of contributing federal political committee. C Name of Employer Jefferson Health Systems Occupation Senior Vice President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3750.00		Date of Receipt MM / DD / YYYY 02 / 23 / 2009 Transaction ID: C2010151 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Harvey A. Englander Mailing Address 515 Dalehurst Avenue City State Zip Code Los Angeles CA 90024 FEC ID number of contributing federal political committee. C Name of Employer Englander & Associates Occupation Public Relations Executive Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 17 / 2009 Transaction ID: C1927101 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		2500.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)
Amato L. Berardi

Mailing Address 555 City Line Avenue
Suite 770

City State Zip Code
Bala Cynwyd PA 19004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Berardi & Associates Consultant

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2009

Transaction ID: C2040211

Amount of Each Receipt this Period
500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
John E. Meyerson

Mailing Address 508 West Mount Airy Avenue

City State Zip Code
Philadelphia PA 19119-2948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UFCW Local 1776 Organizing Director

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C2040301

Amount of Each Receipt this Period
50.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
Henry J. Sallusti

Mailing Address 946 Columbia Street

City State Zip Code
Scranton PA 18509-1714

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RBC Investment Banker

Receipt For: 2012
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3300.00

Date of Receipt
MM / DD / YYYY
01 / 29 / 2009

Transaction ID: C1869151

Amount of Each Receipt this Period
900.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 9 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Louis F. Bucci, III Mailing Address 106 Countryside Drive City State Zip Code Kintnersville PA 18930 FEC ID number of contributing federal political committee. C Name of Employer United Food & Commercial Workers Union Occupation Union Representative Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 0 1 / 2 2 / 2 0 0 9 Transaction ID: C1850541 Amount of Each Receipt this Period 200.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Christopher M. Roe Mailing Address 10 Anthony Drive City State Zip Code Malvern PA 19355-1971 FEC ID number of contributing federal political committee. C Name of Employer Fox Rothschild, LLP Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 0 3 / 0 6 / 2 0 0 9 Transaction ID: C2039692 Amount of Each Receipt this Period 350.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Edward F. Gobora Mailing Address 2021 Beacon Hill Drive City State Zip Code Newtown PA 18940 FEC ID number of contributing federal political committee. C Name of Employer Main Line Advisors Occupation Consultant Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M M / D D D / Y Y Y Y Y Y Y 0 2 / 0 4 / 2 0 0 9 Transaction ID: C1901312 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		800.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 10 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Kenneth L. Ewell Mailing Address 8 Penny Lane City State Zip Code Medford NJ 08055 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 02 / 04 / 2009 Transaction ID: C1901332 Amount of Each Receipt this Period 500.00
Name of Employer The Graham Occupation Vice President Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) David F. Simon Mailing Address 1317 Township Line Road City State Zip Code Gwynedd Valley PA 19437 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 02 / 23 / 2009 Transaction ID: C2010152 Amount of Each Receipt this Period 650.00
Name of Employer Jefferson Health Systems Occupation Senior Vice President Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3750.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Joseph S. Finkelstein Mailing Address 716 Oxford Road City State Zip Code Bala Cynwyd PA 19004 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 19 / 2009 Transaction ID: C2048712 Amount of Each Receipt this Period 1500.00
Name of Employer Blank Rome, LLP Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2650.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 11 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Joseph D. Burke Mailing Address 1460 Wyoming Avenue City State Zip Code Forty Fort PA 18704 FEC ID number of contributing federal political committee. C		Date of Receipt M M M / D D / Y Y Y Y Y Y 03 / 30 / 2009 Transaction ID: C2054672 Amount of Each Receipt this Period 400.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Burke & Burke Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		
B. Full Name (Last, First, Middle Initial) Gene H. Shioda Mailing Address 5757 West Century Boulevard Suite 700 City State Zip Code Los Angeles CA 90045 FEC ID number of contributing federal political committee. C		Date of Receipt M M M / D D / Y Y Y Y Y Y 02 / 11 / 2009 Transaction ID: C1910083 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer The Law Office of Gene H. Shioda Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		
C. Full Name (Last, First, Middle Initial) John R. Alchin Mailing Address 241 South 6th Suite 2311 City State Zip Code Philadelphia PA 19106 FEC ID number of contributing federal political committee. C		Date of Receipt M M M / D D / Y Y Y Y Y Y 02 / 04 / 2009 Transaction ID: C1901133 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Comcast Corporation Occupation Chief Financial Officer Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional) ▶		1150.00
TOTAL This Period (last page this line number only) ▶		

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) A. Roy Decaro</p> <p>Mailing Address 6036 Sheaff Lane</p> <p>City State Zip Code Fort Washington PA 19034</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Raynes McCarty Occupation Attorney</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 06 / 2009</p> <p>Transaction ID: C2039693</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) A.S. Abbasi</p> <p>Mailing Address 1517 Via Coronel</p> <p>City State Zip Code Palos Verdes Estat CA 90274</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Cardiovascular Associates Occupation Physician</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 16 / 2009</p> <p>Transaction ID: C1927123</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Wendell W. Young, IV</p> <p>Mailing Address 2810 Oakridge Circle</p> <p>City State Zip Code Eagleville PA 19403</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer UFCW Local 1776 Occupation Union Representative</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 750.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 06 / 2009</p> <p>Transaction ID: C2040183</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 2250.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 13 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Margaret E. Sallusti Mailing Address 946 Columbia Street City State Zip Code Scranton PA 18509-1714 FEC ID number of contributing federal political committee. C Name of Employer N/A Occupation Homemaker Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2230.00		Date of Receipt 01 / 29 / 2009 Transaction ID: C1869153 Amount of Each Receipt this Period 2230.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Thomas Loeffler Mailing Address 23934 Pentland Way City State Zip Code West Hills CA 91307 FEC ID number of contributing federal political committee. C Name of Employer K2 Promotions Occupation Boxing Promoter Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt 02 / 17 / 2009 Transaction ID: C1927104 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Teresa A. Gillen Mailing Address 2213 Naudain Street City State Zip Code Philadelphia PA 19146 FEC ID number of contributing federal political committee. C Name of Employer National Community Capital Association Occupation Manager Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt 02 / 04 / 2009 Transaction ID: C1901314 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		2730.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Terri Dorsey

Mailing Address 815 Russell Street

City

Nashville

State

TN

Zip Code

37206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clement & Associates, LLC

Occupation
Vice President

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 25 / 2009

Transaction ID: C2010174

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Michael J. Casey

Mailing Address 184 Gwynedd Manor Road

City

North Wales

State

PA

Zip Code

19454-2426

FEC ID number of contributing
federal political committee.

C

Name of Employer
AON Consulting

Occupation
Consultant

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
01 / 22 / 2009

Transaction ID: C1850544

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Joseph D. Burke

Mailing Address 1460 Wyoming Avenue

City

Forty Fort

State

PA

Zip Code

18704

FEC ID number of contributing
federal political committee.

C

Name of Employer
Burke & Burke

Occupation
Attorney

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C2054674

Amount of Each Receipt this Period

600.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Margaret C. McGrath

Mailing Address 1519 Adams Avenue

City

Dunmore

State

PA

Zip Code

18509-2437

FEC ID number of contributing
federal political committee.

C

Name of Employer
Universal Printing, LLC

Occupation
Co-Owner

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

MM / DD / YYYY
02 / 04 / 2009

Transaction ID: C1902845

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Michele L. Kessler

Mailing Address 15 Elm Street

City

Mountain Top

State

PA

Zip Code

18707

FEC ID number of contributing
federal political committee.

C

Name of Employer
UFCW Local 1776

Occupation
Assistant Field Director

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

525.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C2039695

Amount of Each Receipt this Period

200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Asil Mahmood

Mailing Address 9 Dovetail Lane

City

Bradbury

State

CA

Zip Code

91008

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Physician

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 17 / 2009

Transaction ID: C1927105

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Robert A. Abbasi

Mailing Address 1515 West 190th Street
Suite 455

City State Zip Code
Gardena CA 90248

FEC ID number of contributing
federal political committee.

C

Name of Employer
RTI Properties

Occupation
Real Estate Investor

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C1927125

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Terry A. Graboyes

Mailing Address 708 Lombard Street

City State Zip Code
Philadelphia PA 19147-1315

FEC ID number of contributing
federal political committee.

C

Name of Employer
Graboyes Commercial Window
Co.

Occupation
President & Chief Executive Officer

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY
03 / 13 / 2009

Transaction ID: C2040185

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Louis F. Bucci, III

Mailing Address 106 Countryside Drive

City State Zip Code
Kintnersville PA 18930

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Food & Commercial
Workers Union

Occupation
Union Representative

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C2040295

Amount of Each Receipt this Period

25.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1525.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Romulo L. Diaz, Jr.</p> <p>Mailing Address 1326 Spruce Street Apartment 508</p> <p>City Philadelphia State PA Zip Code 19107</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Exelon Business Services Company</p> <p>Occupation Associate General Counsel</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 04 / 2009</p> <p>Transaction ID: C1901115</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Michael D. Soileau</p> <p>Mailing Address 529 Queen Street</p> <p>City Philadelphia State PA Zip Code 19147</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Comcast Corporation</p> <p>Occupation Executive</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 04 / 2009</p> <p>Transaction ID: C1901125</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Kevin P. Ray</p> <p>Mailing Address 229 South Bonsall Street</p> <p>City Philadelphia State PA Zip Code 19103</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Pepper Hamilton</p> <p>Occupation Attorney</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 04 / 2009</p> <p>Transaction ID: C1901335</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ► 1500.00</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Thomas P. Lambert

Mailing Address 11377 West Olympic Boulevard

City

Los Angeles

State

CA

Zip Code

90064

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mitchell Silberberg & Knu-
pp

Occupation
Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
02 / 17 / 2009

Transaction ID: C1927095

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Deborah H. Simon

Mailing Address 1317 Township Line Road
P.O. Box 551

City

Gwynedd Valley

State

PA

Zip Code

19437

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elliott Greenleaf

Occupation
Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
02 / 23 / 2009

Transaction ID: C2010155

Amount of Each Receipt this Period

750.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Richard P. Kane

Mailing Address 1401 Spyglass Lane

City

Clarks Summit

State

PA

Zip Code

18411-2044

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kane Warehousing/Trucking

Occupation
President & CEO

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
01 / 08 / 2009

Transaction ID: C1788475

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 19 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Paul J. Gitnik Mailing Address 1201 Broughton Rd. City State Zip Code Pittsburgh PA 15236 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 30 / 2009 Transaction ID: C2054675 Amount of Each Receipt this Period 900.00
Name of Employer Gitnik and Associates Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1499.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Al Besse Mailing Address 876 Briarwood Road City State Zip Code Newtown Square PA 19073 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 03 / 2009 Transaction ID: C2018096 Amount of Each Receipt this Period 500.00
Name of Employer Logan Capital Management, Inc. Occupation Managing Director Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Edward Chew Mailing Address 43 Franklin Drive City State Zip Code Voorhees NJ 08043 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 06 / 2009 Transaction ID: C2039696 Amount of Each Receipt this Period 200.00
Name of Employer UFCW Local 1776 Occupation Union Representative Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 525.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1600.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 20 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Stephen A. Sheller Mailing Address 512 Hoffman Drive City State Zip Code Bryn Mawr PA 19010-1745 FEC ID number of contributing federal political committee. C Name of Employer Sheller PC Occupation Attorney Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		Date of Receipt MM / DD / YYYY 03 / 10 / 2009 Transaction ID: C2040206 Amount of Each Receipt this Period 600.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) William K. Ryan Mailing Address 1729 Ritter Avenue City State Zip Code Bristol PA 19007 FEC ID number of contributing federal political committee. C Name of Employer Albert Einstein Healthcare Network Occupation Government Relations Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 03 / 06 / 2009 Transaction ID: C2040256 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Richard D. Keaveney Mailing Address 220 W. Washington Sq., #500 City State Zip Code Philadelphia PA 19106 FEC ID number of contributing federal political committee. C Name of Employer Manna Occupation CEO Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 04 / 2009 Transaction ID: C1901336 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		1200.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 21 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Paul J. Gitnik Mailing Address 1201 Broughton Rd. City State Zip Code Pittsburgh PA 15236 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 30 / 2009 Transaction ID: C2054676 Amount of Each Receipt this Period 599.00
Name of Employer Gitnik and Associates Occupation Attorney Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1499.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Thomas V. Girardi Mailing Address 1126 Wilshire Boulevard City State Zip Code Los Angeles CA 90017 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C2039627 Amount of Each Receipt this Period 2400.00
Name of Employer Girardi Keese Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Nicholas J. Farina Mailing Address 412 Tyson Avenue City State Zip Code Glenside PA 19038 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 06 / 2009 Transaction ID: C2039697 Amount of Each Receipt this Period 200.00
Name of Employer UFCW Local 1776 Occupation Union Representative Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 575.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		3199.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Shoaib A. Kothawala

Mailing Address 1041 Laurel Way

City

Beverly Hills

State

CA

Zip Code

90210

FEC ID number of contributing
federal political committee.

C

Name of Employer
International Textile and
Apparel, Inc

Occupation

President & Chief Executive Officer

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
02 / 16 / 2009

Transaction ID: C1927117

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Stephen A. Sheller

Mailing Address 512 Hoffman Drive

City

Bryn Mawr

State

PA

Zip Code

19010-1745

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sheller PC

Occupation

Attorney

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

MM / DD / YYYY
03 / 10 / 2009

Transaction ID: C2040197

Amount of Each Receipt this Period

1400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

William Epstein

Mailing Address 3423 West Coulter Street

City

Philadelphia

State

PA

Zip Code

19129

FEC ID number of contributing
federal political committee.

C

Name of Employer
UFCW Local 1776

Occupation

Union Representative

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C2040297

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 23 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Michael J. Pellini Mailing Address 32371 Carribean Drive City Dana Point State CA Zip Code 92629 FEC ID number of contributing federal political committee. C		Date of Receipt 01 / 29 / 2009 Transaction ID: C1869147 Amount of Each Receipt this Period 1000.00
Name of Employer Clariant, Inc. Occupation President & Chief Operating Officer Election Cycle-to-Date ▼ 1000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Pervaiz Lodhie Mailing Address 12 Upper Blackwater Canyon Road City Rolling Hills State CA Zip Code 90274 FEC ID number of contributing federal political committee. C		Date of Receipt 02 / 16 / 2009 Transaction ID: C2009827 Amount of Each Receipt this Period 1000.00
Name of Employer Ledtronics, Inc. Occupation President & CEO Election Cycle-to-Date ▼ 2000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Lessing E. Gold Mailing Address 211 Spaulding Drive Apartment 101S City Beverly Hills State CA Zip Code 90212 FEC ID number of contributing federal political committee. C		Date of Receipt 02 / 25 / 2009 Transaction ID: C2010147 Amount of Each Receipt this Period 250.00
Name of Employer Mitchell Silberberg & Knupp Occupation Attorney Election Cycle-to-Date ▼ 250.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Receipts This Page (optional) ▶		2250.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 24 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Margaret C. McGrath Mailing Address 1519 Adams Avenue City Dunmore State PA Zip Code 18509-2437 FEC ID number of contributing federal political committee. C Name of Employer Universal Printing, LLC Occupation Co-Owner Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 400.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) \$300 refunded, see line 20a		Date of Receipt M M M / D D / Y Y Y Y Y Y Y 0 2 / 0 4 / 2 0 0 9 Transaction ID: C1902847 Amount of Each Receipt this Period 400.00
B. Full Name (Last, First, Middle Initial) Ronald A. DiNicola Mailing Address 4134 Commodore Drive City Erie State PA Zip Code 16505 FEC ID number of contributing federal political committee. C Name of Employer Muhammed Ali Enterprises, LLC Occupation President & Chief Executive Officer Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 1173.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * In-Kind: Catering & Travel		Date of Receipt M M M / D D / Y Y Y Y Y Y Y 0 2 / 1 7 / 2 0 0 9 Transaction ID: C2054367 Amount of Each Receipt this Period 1173.00
C. Full Name (Last, First, Middle Initial) Vincent Casey Mailing Address 7 East 88th Street City New York State NY Zip Code 10028 FEC ID number of contributing federal political committee. C Name of Employer Orrick, Herrington & Sutcliffe Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		Date of Receipt M M M / D D / Y Y Y Y Y Y Y 0 3 / 0 3 / 2 0 0 9 Transaction ID: C2018098 Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional) ▶		2073.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 25 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Erika Girardi Mailing Address 1126 Wilshire Boulevard City State Zip Code Los Angeles CA 90017 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 09 / 2009 Transaction ID: C2039628 Amount of Each Receipt this Period 2400.00
Name of Employer Self Employed Occupation Recording Artist Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Mansoor Shah Mailing Address 35 Sage Creek City State Zip Code Irvine CA 92603 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 02 / 16 / 2009 Transaction ID: C1927118 Amount of Each Receipt this Period 1000.00
Name of Employer ProHealth Partners Occupation Physician Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Barbara T. Sicalides Mailing Address 425 Woodland Avenue City State Zip Code Wayne PA 19087 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 02 / 04 / 2009 Transaction ID: C1901128 Amount of Each Receipt this Period 500.00
Name of Employer Pepper Hamilton Occupation Attorney Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		3900.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 26 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Malcolm L. Lazin

Mailing Address 510 Walnut Street
1800 Penn Mutual Tower

City Philadelphia State PA Zip Code 19106-3601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rubin, Quinn, Moss & Hean-
ey

Occupation
Attorney

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
02 / 04 / 2009

Transaction ID: C1901308

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

Steven Westly

Mailing Address 2200 Sand Hill Road
Suite 250

City Menlo Park State CA Zip Code 94025

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Westly Group

Occupation
Managing Partner

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 05 / 2009

Transaction ID: C2018099

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

Robert D. Lee

Mailing Address 10866 Wilshire Boulevard
10th Floor

City Los Angeles State CA Zip Code 90024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Tanner, Mainstain, Blatt,
& Glynn

Occupation
Attorney

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
03 / 11 / 2009

Transaction ID: C2039629

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 27 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Neil T. O'Donnell Mailing Address 22 East Union Street Phoenix Plaza Suite 400 City State Zip Code Wilkes-Barre PA 18701-2706 FEC ID number of contributing federal political committee. C Name of Employer O'Donnell Law Offices Occupation Attorney Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4600.00		Date of Receipt M M / D D / Y Y Y Y Y Y 0 1 / 0 6 / 2 0 0 9 Transaction ID: C1760649 Amount of Each Receipt this Period 800.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Eliav Barr Mailing Address 221 Ravenscliff Road City State Zip Code Saint Davids PA 19087 FEC ID number of contributing federal political committee. C Name of Employer Merck & Company, Inc. Occupation Physician Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y Y 0 2 / 0 4 / 2 0 0 9 Transaction ID: C1901329 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Panagiotis Papanicolaou Mailing Address 171 85th Street City State Zip Code Brooklyn NY 11209 FEC ID number of contributing federal political committee. C Name of Employer JF Contracting Occupation Contractor Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y Y 0 1 / 1 2 / 2 0 0 9 Transaction ID: C1821899 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		3300.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 28 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Sean G. D'Arcy Mailing Address 5700 Roosevelt Street City State Zip Code Bethesda MD 20817 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 02 / 25 / 2009 Transaction ID: C2010169 Amount of Each Receipt this Period 250.00
Name of Employer Akin Gump Strauss Hauer & Feld, LLP Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Attorney Election Cycle-to-Date ▼ 500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Michael D. Donovan Mailing Address 5 Salem Court City State Zip Code Malvern PA 19355-9707 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 03 / 13 / 2009 Transaction ID: C2048372A Amount of Each Receipt this Period 1000.00
Name of Employer Donovan Searles LP Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Attorney Election Cycle-to-Date ▼ 1000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Earmarked Contribution: See Below
C. Full Name (Last, First, Middle Initial) ACTBLUE Mailing Address P.O. Box 382110 City State Zip Code Cambridge MA 02238 FEC ID number of contributing federal political committee. C C00401224		Date of Receipt MM / DD / YYYY 03 / 19 / 2009 Transaction ID: C2048372AB Amount of Each Receipt this Period 1000.00
Name of Employer Conduit total listed in Agg. field Election Cycle-to-Date ▼ 8169.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Note: Above Contribution earmarked through this organization.
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Betsy Weand-Kilkenny

Mailing Address 201 Runnymede Avenue

City

Jenkintown

State

PA

Zip Code

19046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ablington Arts Center

Occupation

Development Director

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
03 / 13 / 2009

Transaction ID: C2048373A

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8169.00

Date of Receipt

MM / DD / YYYY
03 / 19 / 2009

Transaction ID: C2048373AB

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

C.

Full Name (Last, First, Middle Initial)

Daniel R. Muroff

Mailing Address 328 Wadsworth Avenue

City

Philadelphia

State

PA

Zip Code

19119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Duane Morris Government
Relations

Occupation

Consultant

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

850.00

Date of Receipt

MM / DD / YYYY
03 / 13 / 2009

Transaction ID: C2048374A

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 30 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) ACTBLUE		Date of Receipt MM / DD / YYYY 03 / 19 / 2009
Mailing Address P.O. Box 382110		Transaction ID: C2048374AB
City Cambridge	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation Conduit total listed in Agg. field	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8169.00	

B. Full Name (Last, First, Middle Initial) Martin Pane		Date of Receipt MM / DD / YYYY 01 / 07 / 2009
Mailing Address RR#2		Transaction ID: C1791995A
City Moscow	State PA	Zip Code 18444
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer U.S. Marshals Service	Occupation Law Enforcement	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Earmarked Contribution: See Below
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) ACTBLUE		Date of Receipt MM / DD / YYYY 01 / 15 / 2009
Mailing Address P.O. Box 382110		Transaction ID: C1791995AB
City Cambridge	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Conduit total listed in Agg. field	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8169.00	

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 31 / 79	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.		Full Name (Last, First, Middle Initial) Zachary B. Hoover		Date of Receipt MM / DD / YYYY 03 / 13 / 2009	
Mailing Address 802 S 6th St., 4				Transaction ID: C2048375A	
City Philadelphia		State PA		Zip Code 19147	
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period 250.00	
Name of Employer Pennsylvania State Senate		Occupation Legislative Assistant		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00		* Earmarked Contribution: See Below	

B.		Full Name (Last, First, Middle Initial) ACTBLUE		Date of Receipt MM / DD / YYYY 03 / 19 / 2009	
Mailing Address P.O. Box 382110				Transaction ID: C2048375AB	
City Cambridge		State MA		Zip Code 02238	
FEC ID number of contributing federal political committee.		C C00401224		Amount of Each Receipt this Period 250.00	
Name of Employer		Occupation Conduit total listed in Agg. field		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 8169.00		[MEMO ITEM] Note: Above Contribution earmarked through this organization.	

C.		Full Name (Last, First, Middle Initial) Gerald T. Harrington		Date of Receipt MM / DD / YYYY 03 / 04 / 2009	
Mailing Address 209 Blackberry Hill Drive				Transaction ID: C2018416A	
City South Kingstown		State RI		Zip Code 02879	
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period 1000.00	
Name of Employer Capital City Group		Occupation Consultant		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		* Earmarked Contribution: See Below	

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8169.00

Date of Receipt

MM / DD / YYYY
03 / 12 / 2009

Transaction ID: C2018416AB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Gerald A. McHugh, Jr.

Mailing Address 4820 Florence Avenue

City

Philadelphia

State

PA

Zip Code

19143-3421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Raynes McCarty

Occupation
Attorney

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

MM / DD / YYYY
03 / 04 / 2009

Transaction ID: C2018417A

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

8169.00

Date of Receipt

MM / DD / YYYY
03 / 12 / 2009

Transaction ID: C2018417AB

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional) ▶

1500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Henry Brandon</p> <p>Mailing Address 5102 South Holt Avenue</p> <p>City State Zip Code Los Angeles CA 90056</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Vintage Fund Management</p> <p>Occupation Investment Manager</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 20 / 2009</p> <p>Transaction ID: C2009208A</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* Earmarked Contribution: See Below</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ACTBLUE</p> <p>Mailing Address P.O. Box 382110</p> <p>City State Zip Code Cambridge MA 02238</p> <p>FEC ID number of contributing federal political committee. C C00401224</p> <p>Name of Employer</p> <p>Occupation Conduit total listed in Agg. field</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 8169.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 26 / 2009</p> <p>Transaction ID: C2009208AB</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>[MEMO ITEM] Note: Above Contribution earmarked through this organization.</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Harold B. Yaffe</p> <p>Mailing Address 237 South 18th Street Apt. 11A</p> <p>City State Zip Code Philadelphia PA 19103-6114</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Self-Employed</p> <p>Occupation Dentist</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 300.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 13 / 2009</p> <p>Transaction ID: C2048378A</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>* Earmarked Contribution: See Below</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 600.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8169.00

Date of Receipt

03 / 19 / 2009

Transaction ID: C2048378AB

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

Full Name (Last, First, Middle Initial)

Michael King

Mailing Address 15332 Antioch Street
Apartment 108

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing
federal political committee.

C

Name of Employer
A2 Holdings

Occupation

Chief Executive Officer

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

03 / 04 / 2009

Transaction ID: C2018419A

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address P.O. Box 382110

City

Cambridge

State

MA

Zip Code

02238

FEC ID number of contributing
federal political committee.

C C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8169.00

Date of Receipt

03 / 12 / 2009

Transaction ID: C2018419AB

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional) ▶

1000.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)
Howard Welinsky

Mailing Address 10525 Bloomfield Street

City Toluca Lake State CA Zip Code 91602-2812

FEC ID number of contributing federal political committee. **C**

Name of Employer Warner Brothers Occupation Senior Vice President

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
02 / 20 / 2009

Transaction ID: C2009209A

Amount of Each Receipt this Period
500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. Box 382110

City Cambridge State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Conduit total listed in Agg. field

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
02 / 26 / 2009

Transaction ID: C2009209AB

Amount of Each Receipt this Period
500.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C.

Full Name (Last, First, Middle Initial)
Ross Feller & Casey, LLP

Mailing Address 1650 Market Street Suite 3450

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
02 / 02 / 2009

Transaction ID: C1869166

Amount of Each Receipt this Period
2400.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)

2900.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Matthew A. Casey

Mailing Address 1613 County Line Road

City

Villanova

State

PA

Zip Code

19085

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Ross Feller Casey, LLP

Occupation

Partner

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

3400.00

Date of Receipt

MM / DD / YYYY
 02 / 02 / 2009

Transaction ID: C1869168

Amount of Each Receipt this Period

1200.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Joel J. Feller

Mailing Address 1200 Hunt Seat Drive

City

Lower Gwynedd

State

PA

Zip Code

19002

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 Ross Feller Casey, LLP

Occupation

Partner

Receipt For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

MM / DD / YYYY
 02 / 02 / 2009

Transaction ID: C1869169

Amount of Each Receipt this Period

1200.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Ross Feller & Casey, LLP

Mailing Address 1650 Market Street
 Suite 3450

City

Philadelphia

State

PA

Zip Code

19103

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

4800.00

Date of Receipt

MM / DD / YYYY
 02 / 02 / 2009

Transaction ID: C1869167

Amount of Each Receipt this Period

2400.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Joel J. Feller

Mailing Address 1200 Hunt Seat Drive

City

Lower Gwynedd

State

PA

Zip Code

19002

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ross Feller Casey, LLP

Occupation
Partner

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

MM / DD / YYYY
02 / 02 / 2009

Transaction ID: C1869171

Amount of Each Receipt this Period

1200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Matthew A. Casey

Mailing Address 1613 County Line Road

City

Villanova

State

PA

Zip Code

19085

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ross Feller Casey, LLP

Occupation
Partner

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3400.00

Date of Receipt

MM / DD / YYYY
02 / 02 / 2009

Transaction ID: C1869172

Amount of Each Receipt this Period

1200.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Gallagher, Briody & Butler

Mailing Address 155 Village Boulevard
Suite 201

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
02 / 04 / 2009

Transaction ID: C1903586

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 79

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Thomas P. Gallagher

Mailing Address 155 Village Boulevard
Suite 201

City

Princeton

State

NJ

Zip Code

08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gallagher Briody & Butler

Occupation
Partner

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
02 / 04 / 2009

Transaction ID: C1927242

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

61977.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 39 / 79	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Catholic Democrats Communications PAC Mailing Address 600 Lewis Road Suite 103 City State Zip Code King of Prussia PA 19406 FEC ID number of contributing federal political committee. C C00448167 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 100.00		Date of Receipt MM / DD / YYYY 03 / 06 / 2009 Transaction ID: C2018100 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Iron Workers Local No. 401 Political Action Fund Mailing Address 11600 Norcom Road City State Zip Code Philadelphia PA 19154 FEC ID number of contributing federal political committee. C C00163535 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt MM / DD / YYYY 03 / 06 / 2009 Transaction ID: C2039690 Amount of Each Receipt this Period 1500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Akin Gump Strauss Hauer & Feld, LLP Civic Action C Mailing Address 1333 New Hampshire Avenue, NW Suite 400 City State Zip Code Washington DC 20036 FEC ID number of contributing federal political committee. C C00104901 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt MM / DD / YYYY 02 / 25 / 2009 Transaction ID: C2010170 Amount of Each Receipt this Period 750.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		2350.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 40 / 79	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Golden State Political Action Committee Mailing Address 1212 South Victory Boulevard Suite 211 City State Zip Code Burbank CA 91502 FEC ID number of contributing federal political committee. C C00145342 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 17 / 2009 Transaction ID: C1927091 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Passenger Rail Today PAC Mailing Address 2321 Blaine Drive City State Zip Code Chevy Chase MD 20815 FEC ID number of contributing federal political committee. C C00424846 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2897.75		Date of Receipt MM / DD / YYYY 02 / 25 / 2009 Transaction ID: C2010171 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) AT&T Inc. Federal PAC Mailing Address 175 E. Houston Street Room 7-A-50 City State Zip Code San Antonio TX 78205 FEC ID number of contributing federal political committee. C C00185124 Name of Employer Occupation Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		Date of Receipt MM / DD / YYYY 03 / 04 / 2009 Transaction ID: C2018093 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2500.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 79

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)
American Dental Political Action Committee

Mailing Address 1111 14th Street NW
Suite 1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee. C C00000729

Name of Employer Occupation

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

MM / DD / YYYY
01 / 08 / 2009

Transaction ID: C1788473

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)
Norfolk Southern Corp. Good Government Fund

Mailing Address Three Commercial Place

City State Zip Code
Norfolk VA 23510

FEC ID number of contributing
federal political committee. C C00009282

Name of Employer Occupation

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

MM / DD / YYYY
03 / 19 / 2009

Transaction ID: C2048713

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)
PA Assoc.of Staff Nurses & Allied Professionals PAC

Mailing Address 1100 East Hector Street
Suite 450

City State Zip Code
Conshohocken PA 19428

FEC ID number of contributing
federal political committee. C C00370569

Name of Employer Occupation

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1750.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C2039694

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

5500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 42 / 79	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) CSX Corporation Good Government Fund Mailing Address 1331 Pennsylvania Avenue, NW Suite 560 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. C C00163832 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt MM / DD / YYYY 02 / 25 / 2009 Transaction ID: C2010165 Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Passenger Rail Today PAC Mailing Address 2321 Blaine Drive City Chevy Chase State MD Zip Code 20815 FEC ID number of contributing federal political committee. C C00424846 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2897.75		Date of Receipt MM / DD / YYYY 02 / 25 / 2009 Transaction ID: C2054265 Amount of Each Receipt this Period 1897.75 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * In-Kind: Catering
C. Full Name (Last, First, Middle Initial) National Community Pharmacists Association PAC Mailing Address 100 Daingerfield Road City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. C C00030809 Name of Employer Occupation Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 03 / 27 / 2009 Transaction ID: C2054256 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional) ▶		6397.75
TOTAL This Period (last page this line number only) ▶		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 79
(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Railway Supply Institute Political Action Committee</p> <p>Mailing Address 50 F Street, NW Suite 7030</p> <p>City Washington State DC Zip Code 20001</p> <p>FEC ID number of contributing federal political committee. C C00261933</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 25 / 2009</p> <p>Transaction ID: C2010157</p> <p>Amount of Each Receipt this Period 2400.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Int'l Brotherhood of Electrical Workers COPE</p> <p>Mailing Address 900 Seventh Street, NW</p> <p>City Washington State DC Zip Code 20001</p> <p>FEC ID number of contributing federal political committee. C C00027342</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 3000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 13 / 2009</p> <p>Transaction ID: C1910078</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Sodexo, Inc. Political Action Committee</p> <p>Mailing Address 9801 Washington Boulevard 12th Floor</p> <p>City Gaithersburg State MD Zip Code 20878</p> <p>FEC ID number of contributing federal political committee. C C00361014</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 25 / 2009</p> <p>Transaction ID: C2010158</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 4400.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) United Association Political Education Committee</p> <p>Mailing Address 3 Park Place</p> <p>City State Zip Code Annapolis MD 21401</p> <p>FEC ID number of contributing federal political committee. C C00012476</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 5000.00</p>	<p>Date of Receipt MM / DD / YYYY 03 / 25 / 2009</p> <p>Transaction ID: C2054258</p> <p>Amount of Each Receipt this Period 5000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Railway Supply Institute Political Action Committee</p> <p>Mailing Address 50 F Street, NW Suite 7030</p> <p>City State Zip Code Washington DC 20001</p> <p>FEC ID number of contributing federal political committee. C C00261933</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2500.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 25 / 2009</p> <p>Transaction ID: C2056359</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Genesee & Wyoming, Inc. PAC</p> <p>Mailing Address 204 North George Street Suite 230</p> <p>City State Zip Code York PA 17401</p> <p>FEC ID number of contributing federal political committee. C C00289058</p> <p>Name of Employer Occupation</p> <p>Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>	<p>Date of Receipt MM / DD / YYYY 02 / 25 / 2009</p> <p>Transaction ID: C2010159</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional) ▶ 6100.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 79

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)
IUOE Operating Engineers Local 542 PAF

Mailing Address 1375 Virginia Drive
Suite 100

City State Zip Code
Fort Washington PA 19034

FEC ID number of contributing
federal political committee.

C C00136739

Name of Employer

Occupation

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
03 / 06 / 2009

Transaction ID: C2039689

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

27747.75

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Progressive Capitol Group, Inc.

Mailing Address 888 16th Street, NW Suite 680

City Washington State DC Zip Code 20006

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D145851

Date of Disbursement

03 / 04 / 2009

Amount of Each Disbursement this Period

4270.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

CitiBank

Mailing Address 14th Street, N.W.

City Washington State DC Zip Code 20005

Purpose of Disbursement
Federal Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D146121

Date of Disbursement

03 / 09 / 2009

Amount of Each Disbursement this Period

11040.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Restaurant Associates

Mailing Address 91337 Collections Drive
PO Box 91337

City Chicago State IL Zip Code 60693

Purpose of Disbursement
Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157271

Date of Disbursement

03 / 20 / 2009

Amount of Each Disbursement this Period

960.75

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

16271.16

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Mayfield Strategy Group, LLC

Mailing Address 961 Ilima Way

City State Zip Code
Palo Alto CA 94306

Purpose of Disbursement
Internet Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D136011

Date of Disbursement

02 / 03 / 2009

Amount of Each Disbursement this Period

4250.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Ronald A. DiNicola

Mailing Address 4134 Commodore Drive

City State Zip Code
Erie PA 16505

Purpose of Disbursement
Catering & Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157521

Date of Disbursement

02 / 17 / 2009

Amount of Each Disbursement this Period

1173.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

* In-Kind Received

C.

Full Name (Last, First, Middle Initial)

Universal Printing Company

Mailing Address 1101 Penn Ave.

City State Zip Code
Scranton PA 18509

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157591

Date of Disbursement

01 / 07 / 2009

Amount of Each Disbursement this Period

1493.26

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

6916.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Ari Mittleman

Mailing Address 234 N. 3rd Street, #301

City
Philadelphia

State
PA

Zip Code
19106

Purpose of Disbursement
Reimbursement - Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D124801

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2009

Amount of Each Disbursement this Period

290.31

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Auburn Quad

Mailing Address P.O. Box 390728

City
Cambridge

State
MA

Zip Code
02139

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D134442

Date of Disbursement

MM / DD / YYYY
01 / 11 / 2009

Amount of Each Disbursement this Period

39.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

NGP Software

Mailing Address 1225 Eye Street, NW
Suite 1225

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
Database Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D146122

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2009

Amount of Each Disbursement this Period

1950.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2279.81

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mayfield Strategy Group, LLC</p> <p>Mailing Address 961 Ilima Way</p>	<p>Transaction ID: D157522</p> <p>Date of Disbursement 03 / 31 / 2009</p>
<p>City Palo Alto State CA Zip Code 94306</p> <p>Purpose of Disbursement Internet Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Amount of Each Disbursement this Period 12750.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address P.O. Box 390728</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157592</p> <p>Date of Disbursement 03 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 1.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Green Ridge Self Storage</p> <p>Mailing Address 521 Green Ridge Street</p> <p>City Scranton State PA Zip Code 18509</p> <p>Purpose of Disbursement Storage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D124802</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 212.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ► 12963.94</p> <p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 17464</p>	<p>Transaction ID: D136013</p> <p>Date of Disbursement <div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>01</div> <div>22</div> <div>2009</div> </div> </p>
<p>City State Zip Code Baltimore MD 21297</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Amount of Each Disbursement this Period <div>802.48</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City State Zip Code Scranton PA 18503</p> <p>Purpose of Disbursement Campaign Automobile</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145203</p> <p>Date of Disbursement <div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>02</div> <div>18</div> <div>2009</div> </div> </p> <p>Amount of Each Disbursement this Period <div>524.27</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Shechtman Marks Devor PC</p> <p>Mailing Address 2000 Market St., Suite 500</p> <p>City State Zip Code Philadelphia PA 19103</p> <p>Purpose of Disbursement Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146123</p> <p>Date of Disbursement <div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div> <div>03</div> <div>11</div> <div>2009</div> </div> </p> <p>Amount of Each Disbursement this Period <div>406.25</div> </p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ <div>1733.00</div></p> <p>TOTAL This Period (last page this line number only) ▶ <div></div></p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020154599

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Restaurant Associates	Transaction ID: D145793 Date of Disbursement
Mailing Address 91337 Collections Drive PO Box 91337	<input type="text" value="02"/> <input type="text" value="18"/> / <input type="text" value="2009"/>
City Chicago State IL Zip Code 60693	Amount of Each Disbursement this Period <input type="text" value="1561.50"/>
Purpose of Disbursement Catering & Meals	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Thierry Dongala	Transaction ID: D135773 Date of Disbursement
Mailing Address 14712 McKnew Road	<input type="text" value="01"/> <input type="text" value="29"/> / <input type="text" value="2009"/>
City Burtonsville State MD Zip Code 20866	Amount of Each Disbursement this Period <input type="text" value="300.00"/>
Purpose of Disbursement Transportation	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) Finnigan's Wake	Transaction ID: D157273 Date of Disbursement
Mailing Address 537 N. Third Street	<input type="text" value="03"/> <input type="text" value="20"/> / <input type="text" value="2009"/>
City Philadelphia State PA Zip Code 19123	Amount of Each Disbursement this Period <input type="text" value="1500.00"/>
Purpose of Disbursement Catering	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3361.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

29020154500

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Progressive Capitol Group, Inc.</p> <p>Mailing Address 888 16th Street, NW Suite 680</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D124713</p> <p>Date of Disbursement 01 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 4950.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Grand Buffets Catering</p> <p>Mailing Address 2458-A W. Main Street</p> <p>City Jeffersonville State PA Zip Code 19403</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D124803</p> <p>Date of Disbursement 01 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 916.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 17464</p> <p>City Baltimore State MD Zip Code 21297</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145204</p> <p>Date of Disbursement 02 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 1121.29</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

29020154601

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Ari Mittleman</p> <p>Mailing Address 234 N. 3rd Street, #301</p> <p>City Philadelphia State PA Zip Code 19106</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D146124</p> <p>Date of Disbursement 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ari Mittleman</p> <p>Mailing Address 234 N. 3rd Street, #301</p> <p>City Philadelphia State PA Zip Code 19106</p> <p>Purpose of Disbursement Fundraising Consulting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D135774</p> <p>Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Friends Of The Poor</p> <p>Mailing Address 2300 Adams Avenue</p> <p>City Scranton State PA Zip Code 18509</p> <p>Purpose of Disbursement Advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D157274</p> <p>Date of Disbursement 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)

8250.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Auburn Quad

Mailing Address P.O. Box 390728

City State Zip Code
Cambridge MA 02139

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157454

Date of Disbursement

03 / 22 / 2009

Amount of Each Disbursement this Period

3.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

David J. Perry

Mailing Address 426 C Street, NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement
Reimbursement - Event Tickets

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157524

Date of Disbursement

01 / 26 / 2009

Amount of Each Disbursement this Period

312.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Progressive Capitol Group, Inc.

Mailing Address 888 16th Street, NW Suite 680

City State Zip Code
Washington DC 20006

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D136284

Date of Disbursement

02 / 05 / 2009

Amount of Each Disbursement this Period

3587.71

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3904.16

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Ari Mittleman

Mailing Address 234 N. 3rd Street, #301

City Philadelphia State PA Zip Code 19106

Purpose of Disbursement
Fundraising Consulting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D124714

Date of Disbursement

01 / 06 / 2009

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

Feastivities, Inc.

Mailing Address 440 Domino Lane

City Philadelphia State PA Zip Code 19128

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D124804

Date of Disbursement

01 / 07 / 2009

Amount of Each Disbursement this Period

2792.48

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

St. Luke & The Epiphany

Mailing Address 330 South 13th Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Site Rental

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D145605

Date of Disbursement

02 / 25 / 2009

Amount of Each Disbursement this Period

350.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

7142.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A. Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City Scranton State PA Zip Code 18503</p> <p>Purpose of Disbursement Campaign Automobile</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135285</p> <p>Date of Disbursement MM / DD / YYYY 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 524.27</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Ari Mittleman</p> <p>Mailing Address 234 N. 3rd Street, #301</p> <p>City Philadelphia State PA Zip Code 19106</p> <p>Purpose of Disbursement Reimbursement - Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D146125</p> <p>Date of Disbursement MM / DD / YYYY 03 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 300.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Perkins Coie, LLP</p> <p>Mailing Address 607 14th Street, NW Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Legal & Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135695</p> <p>Date of Disbursement MM / DD / YYYY 01 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 8131.37</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) M Catering LLC</p> <p>Mailing Address 124 West Berkley Avenue</p> <p>City Clifton Heights State PA Zip Code 19018</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157275</p> <p>Date of Disbursement MM / DD / YYYY 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 475.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Ari Mittleman</p> <p>Mailing Address 234 N. 3rd Street, #301</p> <p>City Philadelphia State PA Zip Code 19106</p> <p>Purpose of Disbursement Reimbursement - Travel & Event Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D136285</p> <p>Date of Disbursement MM / DD / YYYY 02 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 185.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address P.O. Box 390728</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145366</p> <p>Date of Disbursement MM / DD / YYYY 02 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 39.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A. Full Name (Last, First, Middle Initial) Green Ridge Self Storage</p> <p>Mailing Address 521 Green Ridge Street</p> <p>City Scranton State PA Zip Code 18509</p> <p>Purpose of Disbursement Storage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145606</p> <p>Date of Disbursement MM / DD / YYYY 02 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 106.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Perkins Coie, LLP</p> <p>Mailing Address 607 14th Street, NW Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Legal & Accounting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145846</p> <p>Date of Disbursement MM / DD / YYYY 03 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 4120.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Universal Printing Company</p> <p>Mailing Address 1101 Penn Ave.</p> <p>City Scranton State PA Zip Code 18509</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157276</p> <p>Date of Disbursement MM / DD / YYYY 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 9525.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Shechtman Marks Devor PC	Transaction ID: D136286 Date of Disbursement
Mailing Address 2000 Market St., Suite 500	<input type="text" value="02"/> <input type="text" value="10"/> / <input type="text" value="2009"/>
City Philadelphia State PA Zip Code 19103	Amount of Each Disbursement this Period <input type="text" value="220.25"/>
Purpose of Disbursement Accounting Services Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type
B. Full Name (Last, First, Middle Initial) Liz Conroy	Transaction ID: D145607 Date of Disbursement
Mailing Address 837 11th Street Apartment 7	<input type="text" value="02"/> <input type="text" value="24"/> / <input type="text" value="2009"/>
City Santa Monica State CA Zip Code 90403	Amount of Each Disbursement this Period <input type="text" value="300.00"/>
Purpose of Disbursement Transportation Services Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type
C. Full Name (Last, First, Middle Initial) Green Ridge Self Storage	Transaction ID: D135307 Date of Disbursement
Mailing Address 521 Green Ridge Street	<input type="text" value="01"/> <input type="text" value="26"/> / <input type="text" value="2009"/>
City Scranton State PA Zip Code 18509	Amount of Each Disbursement this Period <input type="text" value="106.00"/>
Purpose of Disbursement Storage Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/Type
SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="626.25"/>
TOTAL This Period (last page this line number only)	

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ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Auburn Quad

Mailing Address P.O. Box 390728

City State Zip Code
Cambridge MA 02139

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D146117

Date of Disbursement

03 / 08 / 2009

Amount of Each Disbursement this Period

152.08

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)

James W. Brown

Mailing Address 1602 Sorrell Road

City State Zip Code
Malvern PA 19355-8719

Purpose of Disbursement
Reimbursement - Travel, Event Ticket, & Meals

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D135777

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

680.79

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)

Perkins Coie, LLP

Mailing Address 607 14th Street, NW
Suite 800

City State Zip Code
Washington DC 20005

Purpose of Disbursement
Legal & Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157267

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

4047.31

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4880.18

TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A. Full Name (Last, First, Middle Initial) Green Ridge Self Storage</p> <p>Mailing Address 521 Green Ridge Street</p> <p>City Scranton State PA Zip Code 18509</p> <p>Purpose of Disbursement Storage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157277</p> <p>Date of Disbursement MM / DD / YYYY 03 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 106.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address P.O. Box 390728</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157527</p> <p>Date of Disbursement MM / DD / YYYY 03 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 84.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Auburn Quad</p> <p>Mailing Address P.O. Box 390728</p> <p>City Cambridge State MA Zip Code 02139</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145258</p> <p>Date of Disbursement MM / DD / YYYY 02 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 0.79</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address P.O. Box 17464</p> <p>City Baltimore State MD Zip Code 21297</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157268</p> <p>Date of Disbursement MM / DD / YYYY 03 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 663.91</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City Scranton State PA Zip Code 18503</p> <p>Purpose of Disbursement Campaign Automobile</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157278</p> <p>Date of Disbursement MM / DD / YYYY 03 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 524.27</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Passenger Rail Today PAC</p> <p>Mailing Address 2321 Blaine Drive</p> <p>City Chevy Chase State MD Zip Code 20815</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name Passenger Rail Today PAC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157459</p> <p>Date of Disbursement MM / DD / YYYY 02 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1897.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* In-Kind Received</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	
<p>TOTAL This Period (last page this line number only)</p>	

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City Scranton State PA Zip Code 18503</p> <p>Purpose of Disbursement Credit Card Payment, See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135287</p> <p>Date of Disbursement MM / DD / YYYY 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 14564.18</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) OnStar</p> <p>Mailing Address 400 Renaissance Center</p> <p>City Detroit State MI Zip Code 48265</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135302</p> <p>Date of Disbursement MM / DD / YYYY 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 30.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Waldorf Astoria Hilton</p> <p>Mailing Address 301 Park Avenue</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135304</p> <p>Date of Disbursement MM / DD / YYYY 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 1229.18</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	
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FEC Schedule B (Form 3) (Revised 02/2003)

20020154512

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Exxon Mobil</p> <p>Mailing Address 1696 N. Keyser Avenue</p> <p>City Scranton State PA Zip Code 18508</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135295</p> <p>Date of Disbursement MM / DD / YYYY 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 5.63</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Waldorf Astoria Hilton</p> <p>Mailing Address 301 Park Avenue</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135305</p> <p>Date of Disbursement MM / DD / YYYY 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 120.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 4980</p> <p>City Hagerstown State MD Zip Code 21747-4980</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135296</p> <p>Date of Disbursement MM / DD / YYYY 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 59.05</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.	Transaction ID: D135306 Date of Disbursement
Mailing Address 150 N. Washington Avenue	<div> <div>01</div> <div>23</div> <div>2009</div> </div>
City State Zip Code Scranton PA 18503	Amount of Each Disbursement this Period <div>202.42</div>
Purpose of Disbursement Bank Fee	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: D135298 Date of Disbursement
Mailing Address 60 Massachusetts Avenue, NE 2nd Floor	<div> <div>01</div> <div>23</div> <div>2009</div> </div>
City State Zip Code Washington DC 20002	Amount of Each Disbursement this Period <div>533.00</div>
Purpose of Disbursement Travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]
C. Full Name (Last, First, Middle Initial) W Hotel	Transaction ID: D135299 Date of Disbursement
Mailing Address 541 Lexington Avenue	<div> <div>01</div> <div>23</div> <div>2009</div> </div>
City State Zip Code New York NY 10022	Amount of Each Disbursement this Period <div>12209.52</div>
Purpose of Disbursement Catering	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	[MEMO ITEM]
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address P.O. Box 15732</p> <p>City State Zip Code Wilmington DE 19886</p> <p>Purpose of Disbursement Credit Card Payment, See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D136287</p> <p>Date of Disbursement MM / DD / YYYY 02 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 317.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Priceline Inc.</p> <p>Mailing Address 800 Connecticut Avenue</p> <p>City State Zip Code Norwalk CT 06854</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D136289</p> <p>Date of Disbursement MM / DD / YYYY 02 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 317.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City State Zip Code Scranton PA 18503</p> <p>Purpose of Disbursement Credit Card Payment, See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145610</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 1944.79</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional)</p>	
<p>TOTAL This Period (last page this line number only)</p>	

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2003)

20020154615

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Exxon Mobil</p> <p>Mailing Address 1696 N. Keyser Avenue</p> <p>City Scranton State PA Zip Code 18508</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145611</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 48.77</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City Scranton State PA Zip Code 18503</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145661</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 189.35</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) UPS</p> <p>Mailing Address PO Box 4980</p> <p>City Hagerstown State MD Zip Code 21747-4980</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145662</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 120.46</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Avenue, NE 2nd Floor</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145614</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 924.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address Federal Square Station</p> <p>City Harrisburg State PA Zip Code 17108</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145615</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 85.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) OnStar</p> <p>Mailing Address 400 Renaissance Center</p> <p>City Detroit State MI Zip Code 48265</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145618</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 30.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Northern Car Rental</p> <p>Mailing Address 9 S Keyser Ave</p> <p>City Taylor State PA Zip Code 18517-1501</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D145619</p> <p>Date of Disbursement MM / DD / YYYY 02 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 450.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City Scranton State PA Zip Code 18503</p> <p>Purpose of Disbursement Credit Card Payment, See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157279</p> <p>Date of Disbursement MM / DD / YYYY 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 2955.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City Scranton State PA Zip Code 18503</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157280</p> <p>Date of Disbursement MM / DD / YYYY 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 70.04</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p>	
<p>TOTAL This Period (last page this line number only) ►</p>	

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

Sunoco, Inc.

Mailing Address 2627 Pittston Ave.

City State Zip Code
Scranton PA 18505

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157290

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

27.73

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

UPS

Mailing Address PO Box 4980

City State Zip Code
Hagerstown MD 21747-4980

Purpose of Disbursement

Shipping

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157282

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

47.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

U.S. Airways

Mailing Address 4000 E. Sky Harbor Blvd.

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157283

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

312.20

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Amtrak</p> <p>Mailing Address 60 Massachusetts Avenue, NE 2nd Floor</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157293</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 65.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address P.O. Box 66919</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157284</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 605.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Expedia Services</p> <p>Mailing Address 3150 139th Avenue, SE</p> <p>City Bellevue State WA Zip Code 98005</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157285</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 7.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶ 0.00</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
Bob Casey for Senate Inc

<p>A. Full Name (Last, First, Middle Initial) Hub Cira Centre</p> <p>Mailing Address 2929 Arch Street</p> <p>City Philadelphia State PA Zip Code 19104</p> <p>Purpose of Disbursement Catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157286</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 849.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Exxon Mobil</p> <p>Mailing Address 1696 N. Keyser Avenue</p> <p>City Scranton State PA Zip Code 18508</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157297</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 28.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) OnStar</p> <p>Mailing Address 400 Renaissance Center</p> <p>City Detroit State MI Zip Code 48265</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157288</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 30.56</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

Full Name (Last, First, Middle Initial)

Hilton Hotels

Transaction ID: D157289

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2009

Mailing Address 9336 Civic Center Drive

City State Zip Code
Beverly Hills CA 90210

Amount of Each Disbursement this Period

496.13

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

121785.41

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Friends Of Todd Eachus	Transaction ID: D136010 Date of Disbursement
Mailing Address P.O. Box 2174	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div>01</div> <div>30</div> <div>2009</div>
City Hazleton State PA Zip Code 18201	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Refund Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Mrs. Margaret C. McGrath	Transaction ID: D157526 Date of Disbursement
Mailing Address 1519 Adams Avenue	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div>02</div> <div>12</div> <div>2009</div>
City Dunmore State PA Zip Code 18509-2437	Amount of Each Disbursement this Period 300.00
Purpose of Disbursement Refund Candidate Name Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) Pennsylvanians For Better Leadership PAC	Transaction ID: D157269 Date of Disbursement
Mailing Address P.O. Box 22430	<div> <div>MM</div> <div>DD</div> <div>YY</div> </div> <div>03</div> <div>26</div> <div>2009</div>
City Philadelphia State PA Zip Code 19110	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Refund Candidate Name Pennsylvanians For Better Leadership PAC Category/Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	2300.00
TOTAL This Period (last page this line number only)	2300.00

SCHEDULE B (FEC Form 3) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)
Bob Casey for Senate Inc

<p>A. Full Name (Last, First, Middle Initial) Pegasus Child Advocacy Center</p>	<p>Transaction ID: D157270 Date of Disbursement</p>
<p>Mailing Address 65 Scott Street</p>	<p><input type="text" value="03"/> <input type="text" value="MM"/> / <input type="text" value="25"/> <input type="text" value="DD"/> / <input type="text" value="2009"/> <input type="text" value="YY"/></p>
<p>City Carbondale State PA Zip Code 18407</p>	<p>Amount of Each Disbursement this Period <input type="text" value="4200.00"/></p>
<p>Purpose of Disbursement Donation</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>State: District:</p>	
<p>B. Full Name (Last, First, Middle Initial) Restaurant Associates</p>	<p>Transaction ID: D145792 Date of Disbursement</p>
<p>Mailing Address 91337 Collections Drive PO Box 91337</p>	<p><input type="text" value="02"/> <input type="text" value="MM"/> / <input type="text" value="18"/> <input type="text" value="DD"/> / <input type="text" value="2009"/> <input type="text" value="YY"/></p>
<p>City Chicago State IL Zip Code 60693</p>	<p>Amount of Each Disbursement this Period <input type="text" value="166.50"/></p>
<p>Purpose of Disbursement Meals - Officially Connected</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>State: District:</p>	
<p>C. Full Name (Last, First, Middle Initial) Restaurant Associates</p>	<p>Transaction ID: D157272 Date of Disbursement</p>
<p>Mailing Address 91337 Collections Drive PO Box 91337</p>	<p><input type="text" value="03"/> <input type="text" value="MM"/> / <input type="text" value="20"/> <input type="text" value="DD"/> / <input type="text" value="2009"/> <input type="text" value="YY"/></p>
<p>City Chicago State IL Zip Code 60693</p>	<p>Amount of Each Disbursement this Period <input type="text" value="78.00"/></p>
<p>Purpose of Disbursement Meals - Officially Connected</p>	<p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Candidate Name</p>	<p>Category/ Type</p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
<p>State: District:</p>	

SUBTOTAL of Disbursements This Page (optional)

4444.50

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A. Full Name (Last, First, Middle Initial) Restaurant Associates	Transaction ID: D135284 Date of Disbursement
Mailing Address 91337 Collections Drive PO Box 91337	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 01 / 23 / 2009
City Chicago State IL Zip Code 60693	Amount of Each Disbursement this Period <input type="text"/> 54.00
Purpose of Disbursement Meals - Officially Connected	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<input type="text"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
B. Full Name (Last, First, Middle Initial) Democratic Conference Luncheon Fund	Transaction ID: D135694 Date of Disbursement
Mailing Address United States Senate	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 01 / 28 / 2009
City Washington State DC Zip Code 20510	Amount of Each Disbursement this Period <input type="text"/> 500.00
Purpose of Disbursement Meals - Officially Connected	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<input type="text"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
C. Full Name (Last, First, Middle Initial) Restaurant Associates	Transaction ID: D135776 Date of Disbursement
Mailing Address 91337 Collections Drive PO Box 91337	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 01 / 26 / 2009
City Chicago State IL Zip Code 60693	Amount of Each Disbursement this Period <input type="text"/> 186.50
Purpose of Disbursement Meals - Officially Connected	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name	<input type="text"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
SUBTOTAL of Disbursements This Page (optional)	<input type="text"/> 740.50
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)
Penn Security Bank & Trust Co.

Mailing Address 150 N. Washington Avenue

City State Zip Code
Scranton PA 18503

Purpose of Disbursement
Credit Card Payment, See Below

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: D135286

Date of Disbursement

01 / 23 / 2009

Amount of Each Disbursement this Period

591.29

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
New York Pizza, Inc.

Mailing Address 1401 Pennsylvania Avenue, SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement
Meals - Officially Connected

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: D135290

Date of Disbursement

01 / 23 / 2009

Amount of Each Disbursement this Period

307.73

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Schneider's Of Capitol Hill

Mailing Address 300 Massachusetts Avenue, NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement
Beverages for Event - Officially Connected

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼
State: District:

Transaction ID: D135292

Date of Disbursement

01 / 23 / 2009

Amount of Each Disbursement this Period

136.59

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

591.29

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Budget Rent A Car</p> <p>Mailing Address 50 Massachusetts Avenue</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Travel - Officially Connected</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D135288</p> <p>Date of Disbursement MM / DD / YYYY 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 63.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank Of America</p> <p>Mailing Address P.O. Box 15732</p> <p>City Wilmington State DE Zip Code 19886</p> <p>Purpose of Disbursement Credit Card Payment, See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157298</p> <p>Date of Disbursement MM / DD / YYYY 03 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 35.94</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Penn Security Bank & Trust Co.</p> <p>Mailing Address 150 N. Washington Avenue</p> <p>City Scranton State PA Zip Code 18503</p> <p>Purpose of Disbursement Credit Card Payment, See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D157320</p> <p>Date of Disbursement MM / DD / YYYY 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 989.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Bob Casey for Senate Inc

A.

Full Name (Last, First, Middle Initial)

701 Restaurant

Mailing Address 701 Pennsylvania Avenue, NW

City Washington State DC Zip Code 20004

Purpose of Disbursement
Catering - Officially Connected

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157294

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2009

Amount of Each Disbursement this Period

450.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Schneider's Of Capitol Hill

Mailing Address 300 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Beverages for Event - Officially Connected

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D157295

Date of Disbursement

MM / DD / YYYY
03 / 25 / 2009

Amount of Each Disbursement this Period

381.46

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

6801.88

United States Senate

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Date of Receipt or Postmark

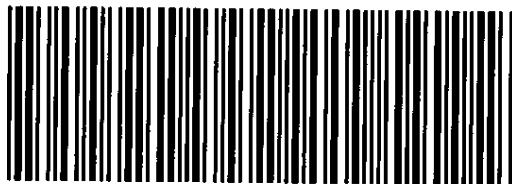
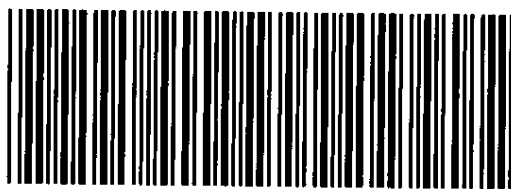
PREPARER

RD

DATE PREPARED

04-15-09

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